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DATE: July 23, 2004 TIME: 3:58 PM
TO: Lauren Q. Wells PHONE: (571) 272-0634
U.S.P.T.O. GAU 1617 FAX: (703) 872-9306
FROM: Dorene M. Price PHONE: (631) 531-1194
Estée Lauder Companies FAX: (631) 531-1340
RE: Notice of Appeal (S/N 09/248,524)

CC:


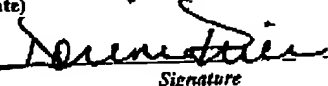
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Message

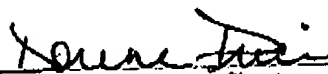
Please see the attached documents.

1. Combined Notice of Appeal and Extension of Time (duplicate)

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| COMBINED NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES & PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. 1.136(a) (Large Entity) | | | | | Docket No. 2870/72 (97.37US-RCE) | |
| In Re Application Of: Shah | | | | | | |
| Application No. 09/248,524 | Filing Date February 9, 1999 | Examiner Wells, LaurenQ. | Customer No. NA | Group Art Unit 1617 | Confirmation No. NA | |
| Invention: Long-Wearing Cosmetic Compositions | | | | | | |
| <u>TO THE COMMISSIONER FOR PATENTS:</u> This combined Notice of Appeal from the Primary Examiner to the Board of Patent Appeals and Interferences and petition for extension of time under 37 CFR 1.136(a) is respectfully submitted by the undersigned: <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 40%;"> _____ Signature</div><div style="width: 50%; text-align: right;">Dated: July 23, 2004 _____</div></div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; width: 40%;">Dorene M. Price (Reg. No. 43,018) Estee Lauder Companies 125 Pinelawn Road Melville, NY 11747 (631) 531-1194</div> | | | | | | |
| <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p style="text-align: center;">Certificate of Transmission by Facsimile*</p><div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax: 703-872-9306 703-872-9306) July 23, 2004 July 23, 2004 to 703-872-9306. (Date)</p> _____ Signature<p style="text-align: center;">DORENE M. PRICE</p><p style="text-align: center;">Typed or Printed Name of Person Signing Certificate</p></div></div><div style="width: 45%;"><p style="text-align: center;">Certificate of Mailing</p><div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p style="text-align: center;">_____ Signature of Person Mailing Correspondence</p> <p style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</p></div></div></div> | | | | | | |

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| <u>COMMISSIONER FOR PATENTS:</u> | | | | | |
| This is a combined Notice of Appeal from the Primary Examiner to the Board of Patent Appeals and Interferences and petition under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of <u>March 23, 2004</u> in the above-identified application. <small style="margin-left: 40px;">Date</small> | | | | | |
| Applicant(s) hereby appeal(s) to the Board of Patent Appeals and Interferences from the decision of the Primary Examiner dated March 23, 2004 finally rejecting Claim(s) | | | | | |
| Applicant(s) hereby request(s) an extension of time of (check desired time period): <input checked="" type="checkbox"/> One month <input type="checkbox"/> Two months <input type="checkbox"/> Three months <input type="checkbox"/> Four months <input type="checkbox"/> Five months | | | | | |
| from: <u>June 23, 2004</u> until: <u>July 23, 2004</u> <small style="margin-left: 100px;">Date</small> <small>Date</small> | | | | | |
| The fee for the Notice of Appeal and Extension of Time has been calculated as shown below: | | | | | |
| Fee for Notice of Appeal: <u>\$330.00</u> | | | | | |
| Fee for Extension of Time: <u>\$110.00</u> | | | | | |
| TOTAL FEE FOR NOTICE OF APPEAL AND EXTENSION OF TIME: <u>\$440.00</u> | | | | | |
| The fee for the Notice of Appeal and extension of time is to be paid as follows: | | | | | |
| <input type="checkbox"/> A check in the amount of _____ for the Notice of Appeal and extension of time is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Please charge Deposit Account No. 05-1320 in the amount of \$440.00 | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 05-1320 | | | | | |
| <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. | | | | | |
| <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. | | | | | |
| <input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a petition therefor and charge any additional fee which may be required to Deposit Account No. 05-1320 | | | | | |

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| <div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p style="text-align: center;">Certificate of Transmission by Facsimile*</p><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax 703-872-9306 703-872-9304) July 23, 2004 (Date)</div><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; text-align: center;">_____ <i>Signature</i></div><div style="border: 1px solid black; padding: 5px; text-align: center;">DORENE M. PRICE <i>Typed or Printed Name of Person Signing Certificate</i></div></div><div style="width: 48%;"><p style="text-align: center;">Certificate of Mailing</p><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="border: 1px solid black; padding: 5px; margin-bottom: 5px; text-align: center;">_____ <i>Signature of Person Mailing Correspondence</i></div><div style="border: 1px solid black; padding: 5px; text-align: center;">_____ <i>Typed or Printed Name of Person Mailing Correspondence</i></div></div></div> <div style="margin-top: 10px;">*This certificate may only be used if paying by deposit account.</div> | | | | | |
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